

DoveLewis[®]
**Third Thursday
Rounds**

April 15, 2021

**Through the Lens of Trauma:
Experiences in Veterinary Medicine**

Presented by

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Virtual Third Thursday: Attendee FAQ's

Do I need to create my own Zoom account to attend?

No. You can access the webinar through the link in your confirmation email. Click the link that says, "Click Here to Join" at the time of the lecture.

Is there someone to help if I have trouble accessing the lecture?

Yes. Please reach us at contact@dovelewis.org if you're experiencing difficulties joining the meeting. During the lecture, you can use the "Raise Hand" function and someone will be able to help you.

Is attendance tracked?

Yes. As you register for the Zoom meeting, you will be asked to enter your information. Attendance is tracked for RACE records.

Is this lecture RACE approved?

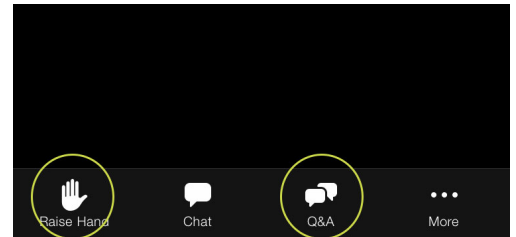
Yes. This lecture is RACE-Approved for one Interactive-Distance CE credit. You will receive an emailed certificate of attendance within one business day after the event.

Will I be able to ask questions?

Yes. If you have questions during the lecture, please use the Q&A function to submit your question. We will save questions for the end of the lecture.

Will I be able to talk?

No. All attendees will be in listen-only mode. If you have a question or need help, the Q&A or Raise Hand function.



Will the presenter or other attendees be able to see me?

No. All attendees will only have the capability to listen to the presenter.

How will I get my certificate?

You must register by using the Zoom link to prove attendance. You will receive an emailed certificate of attendance within one business day after the event.

Do I have to answer the poll questions?

No. The poll questions are optional, but we encourage you to try!

Can I record the lecture?

No. The lecture will only be recorded by DoveLewis, and will likely be available on atdove.org at a later date.

For more support, please email contact@dovelewis.org

Through the Lens of Trauma: Experiences in Veterinary Medicine

The body's physiological response to non-immediate stresses is largely the same as when you are fighting for survival, and the brain's response to threat is based on perceived rather than actual threat. These systems are all designed to support our survival and rather than thinking of one process in opposition to the other, it is important to remember that we thrive when they are balanced.

The Yerkes-Dodson law recognizes that rather than all stress being bad, humans tend to perform optimally with levels of moderate pressure. When pressure is time limited – resulting in brief increases in heart rate and mild elevations in stress hormone levels – this can be considered positive stress. In contrast toxic stress is marked by a prolonged activation of the stress response system in the absence of protective relationships.

“Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individuals functioning and mental, physical, social, emotional, or spiritual well-being” (SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach). Trauma may directly impact an individual or the impact may be indirect, resulting in vicarious or secondary trauma.

There is growing knowledge of the health impacts resulting from trauma and the cumulative toll that can result from toxic stress. Both trauma and toxic stress are mind-body processes and learning what is happening in the brain and body – understanding its responses – opens the space for compassion. This awareness can empower us – shifting us away from isolation, fear, and shame – to understand the body's protective responses and to encourage us to engage in the healing and care of ourselves.

Dr. Pat Ogden, and Dr. Dan Siegel utilize the “Window of Tolerance” to describe the optimal level of arousal where people are best able to cope with stress. Stress and trauma can shrink the “Window of Tolerance,” and there are intentional practices that can be used to expand the window. Expanding the window supports our ability to cope with challenges thus supporting our resilience.

The cumulative toll of stress and trauma can manifest in different ways intra-personally and interpersonally – that is within group dynamics. For example, with the inability to embrace complexity, rather than allowing for the possibility of multiple truths and nuance, one's view starts to narrow, and experiences or situations become either good or bad and right or wrong. When one is in this space, one may feel an intense pressure to be right and one of the dynamics that can stem from this is clique-iness and gossip or having rigid expectations of others. This starts to look and feel a lot like, “You're either helping me get the job done or you're in my way.” An inability to embrace complexity relates to the inability to see and appreciate a person as the complex individual they are.

Compassion fatigue has been defined as the emotional residue or strain of exposure to working with those suffering from the consequences of traumatic events. It has also been referred to as the “cost of caring.” In an individual suffering from compassion fatigue, this cost can include damage to your closely held belief systems and world view. The trauma we are exposed to in our roles as veterinarians can directly contribute to compassion fatigue, whether it is the secondary or vicarious trauma of witnessing traumatized clients, or our own exposure to traumatizing incidents such as being attacked by a patient or an unexpected patient death.

Through the Lens of Trauma: Experiences in Veterinary Medicine

In contrast, compassion satisfaction is the state of finding meaning and value in acting on your compassion for others. The concept of “exquisite empathy” was developed by Richard Harrison and Marvin Westwood at the University of British Columbia to describe finding internal balance, even in the midst of emotionally difficult situations. It refers to genuinely engaging empathetically in a healthy, well-boundaried way that embraces being truly present. This is a skill we can practice and get better at over time. Learning to maintain your own protective boundaries while caring for those experiencing profound grief or trauma can allow you to maintain a meaningful connection without taking on the trauma and grief yourself.

Burnout has been described by Maslach et al. as having three main components: overwhelming exhaustion, feelings of cynicism and detachment from the job, and a sense of ineffectiveness or lack of accomplishment. This syndrome occurs when there is a mismatch in workload, control, reward, community, fairness, and values in the workplace. In contrast to compassion fatigue, the friction that occurs in burnout is workplace-related and changing the workplace conditions can be all that is necessary to eliminate burnout.

If you think about what an individual experiencing burnout in the veterinary field might look like, you can start to see the interplay with stress and trauma. Burnout by definition narrows our window of tolerance. Our usual reserves have been depleted, leaving us exposed to overwhelming stress and trauma that we might have otherwise been capable of coping with. Our sympathetic nervous system overwhelms us.

Another concept that is important in thinking about how trauma is present in the field of veterinary medicine is that of moral distress. Moral distress occurs when we know the right thing to do but cannot pursue what we feel is the correct course due to external constraints. Moral distress is a concept that feels very intuitive to many veterinary professionals because it is so easy to identify countless examples in our own lives. One of the most valuable things we can do for our own mental health and wellbeing is to acknowledge when we experience moral distress in the course of the work we do. Financial constraints, limited resources, conflicting views on animals as property versus family – all of these factors and more set up the potential for moral distress in our everyday work lives. Clearly defining our own values and using our moral imagination to identify what conflicting values might exist can help us to define the issue and remove the guilt and shame that serves only to isolate us.

Moral distress is directly inverse to “moral agency”, which is your ability to act in a manner consistent with your moral judgments. This represents an important overlap with some key concepts in models of burnout. Two of the important contributors to burnout are a lack of control and a mismatch of values. Moral distress refers to the very potent combination of these two factors, and unsurprisingly, moral distress has been identified as an independent risk factor for burnout in critical care providers.

We hope that by approaching familiar concepts like communication and burnout with a trauma lens, we have been able to highlight how they interconnect in our experience as veterinary providers. Even if your life has not been touched by trauma, your coworkers and clients are very likely to have experienced trauma in their lives. Being attuned to that possibility can help us shift into a better informed, more compassionate way to move through our work lives.

Trauma and Stress Dynamic Terms

Minimizing occurs when it takes a more intense level of suffering to draw your attention. It can seem that less extreme trauma is less real, and there is a tendency to downplay things that are not the most extreme hardship.

An **inability to embrace complexity** directly relates to the information about the Window of Tolerance. Rather than allowing for the possibility of multiple truths and nuance, our view starts to narrow, and things become good or bad and right or When we are in this space, we feel an intense pressure to be right and one of the dynamics that can stem from this is clique-iness and gossip or having rigid expectations of other. This starts to look and feel a lot like you are either helping me get the job done or you are in my way. An inability to embrace complexity relates to the inability to see and appreciate a person as the complex individual they are.

When someone is feeling **helplessness or hopelessness**, they may question if they are making any impact at all. It is hard to see progress or the good things. They may feel overwhelmed and like nothing will make it better.

Stress and trauma can also manifest as a sense that **one can never do enough**. This is often accompanied by a sense of urgency, and worries that I am not good enough, I am not tough enough, and I am not doing enough and should do more. And feeding into this thought and feeling by trying to do more when there is not realistically more that can be done certainly contributes to burnout.

Hypervigilance is being so focused on your job that being present for anything else seems impossible. It is hard to relax and isengage, particularly when you are not at work. And you may feel like you are always on.

The **inability to listen/avoidance** may be when the best part of your day is when you do not have to do your job, or you are starting to avoid things in your personal life.

Dissociated moments may look like losing track of time because something someone said impacted you, or maybe you forget the last five sentences you said or did not hear the last part of what someone was sharing with you.

Chronic exhaustion/physical ailments can arise from a workplace culture that implies that fatigue is an accepted aspect of the work: if you are not tired, you are not doing it right. Sometimes this bleeds into the invalidation of rest and taking breaks. Stress and trauma are in our bodies and play out in our nervous system. This may show up when we push through a tough week and then when we finally get to relax on the weekend or the first rest day after a shift, and then you get sick.

When you work in and next to stress and trauma, you may start to feel **guilty** about pleasurable things in your life when your patients and clients are suffering. Guilt can distract you from being present, and it can make it difficult to find joy because of the guilt associated with how we live in a world with such disparities in resources and privilege.

Anger and cynicism – sometimes a cynical sense of humor is one way that people may try to cope with anger.

Trauma and Stress Dynamic Terms

Grandiosity can happen when work starts to become the center of someone's identity. It starts to feel like your work is incredibly important and if it were not for you, no one else could do it. When stress and trauma manifest in this way, as with many of these examples, there is an insidious tendency to double down into the thoughts, feelings, and behaviors that reinforce themselves, and it can leave you feeling like you are stuck in a loop.

A **sense of persecution** goes hand-in-hand with focusing on those things that are not within our control. There is a conviction that others are solely responsible for our well-being, and we lack any ability to transform our circumstances.

Diminished creativity includes boredom with what you are doing or feeling stagnant in your ability to be innovative. Sometimes this is reflected in craving more structure rather than creativity.

Addictions can include substances, and it can also include distractions. Some people may become dependent on adrenaline or want to stay wired or constantly busy, so you do not have to slow down and really feel what is going on around you. For some this may look like working all the time, or it is when you are hanging with work friends, and it is hard to talk about anything besides work – relationships are at the crux of trauma, and sometimes we form strong bonds within trauma that do not always serve us.

Addictions can also relate to the **inability to empathize or numbing**. After experiencing so much overwhelm from stress and trauma, it can be protective to numb; however, the consequence of that being that we cannot selectively numb emotions, so then there is difficulty experiencing any kind of emotion, including the ones that are perceived as more neutral or positive.

Fear can result from the exposure to suffering, which brings light to the dangers of the world. Like with the inability to empathize, this can include a fear of feeling intense emotions or of being vulnerable. One of the impacts of trauma that I mentioned before is that it can cause a shift in worldview, and once exposed, one does not return to a time of not knowing.

WHAT WE BRING

HUMAN STORIES IN VETMED

ATDOVE.ORG'S NEW PODCAST HIGHLIGHTS THE HUMANS BEHIND THE ANIMALS WE CARE FOR

This past year has had a unique impact on the veterinary industry as we all have had to adjust to new protocols, increased patient counts, and more.

Our new podcast, *What We Bring*, offers an inside look at the stories and experiences of people who care for our pets. We hope you'll join us!

ABOUT THE SHOW

When we walk onto the floor for our shift, we all bring with us our own unique stories. *What We Bring* examines the human experiences of those working in veterinary medicine, from the front desk to the O.R. Join DoveLewis Veterinary Well-Being Director Debrah Lee, LCSW, as she explores the real human stories behind the animals we care for.

We hope this podcast will shine a light on the experiences (good and bad) we bring with us to the clinic, and help move us towards greater openness and understanding as an industry. We know that not every lesson can be found in textbooks and training plans, so we're turning to each other to connect, listen, learn, and grow.



WHERE TO FIND US

Click [here](#) to listen to the first episode where we explore imposter syndrome, client compassion, and more with emergency CVT Kara.



MEET HOST DEBRAH LEE, LCSW

Debrah Lee, LCSW, joined the DoveLewis team in 2020 as the Veterinary Well-Being Program Director. Coming from a background in human healthcare, Debrah has long had an interest in how emotionally-demanding medical settings affect both patients and providers. Debrah brings a compassionate presence and deep appreciation for the human experiences that connect us, and she is eager to learn more from veterinary professionals about their experiences within the world of veterinary medicine.



I CANNOT CONTROL



THE ACTIONS OF OTHERS

HOW OTHERS REACT



HOW LONG THIS WILL LAST



MY OWN SOCIAL DISTANCING

TURNING OFF the NEWS

MY Pawstive ATTITUDE

FINDING FUN THINGS TO DO AT home



LIMITING SOCIAL MEDIA



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VetWrap

Volume 14 Issue 2

Coaching and Management

To Err is Human

In a shame and blame culture, do you think the individual who made the error is able to learn and grow from their mistake?

[Read more](#)



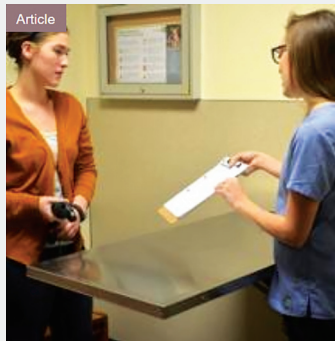
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